

Exhibit 2

Part 2 of 3

Form 990 (1993)

BENEVOLENCE INT'L FOUNDATION

EIN: 36-3823186

Y/E: 4-30-94 Page 3

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets			
45	Cash—non-interest-bearing	—	45 201,225
46	Savings and temporary cash investments	—	46 —
47a	Accounts receivable	—	47a —
b	Less: allowance for doubtful accounts	—	47b —
48a	Pledges receivable	—	48a —
b	Less: allowance for doubtful accounts	—	48b —
49	Grants receivable	—	49 —
50	Receivables due from officers, directors, trustees, and key employees (attach schedule)	—	50 —
51a	Other notes and loans receivable (attach schedule)	—	51a —
b	Less: allowance for doubtful accounts	—	51b —
52	Inventories for sale or use	—	52 —
53	Prepaid expenses and deferred charges	—	53 —
54	Investments—securities (attach schedule)	—	54 —
55a	Investments—land, buildings, and equipment: basis	—	55a —
b	Less: accumulated depreciation (attach schedule)	—	55b —
56	Investments—other (attach schedule)	—	56 —
57a	Land, buildings, and equipment: basis	—	57a 19,956
b	Less: accumulated depreciation (attach schedule)	—	57b 3,165
58	Other assets (describe ► RENT SECURITY DEPOSIT)	—	58 800
59	Total assets (add lines 45 through 58) (must equal line 75)	—	59 218,816
Liabilities			
60	Accounts payable and accrued expenses	—	60 735
61	Grants payable	—	61 —
62	Support and revenue designated for future periods (attach schedule)	—	62 —
63	Loans from officers, directors, trustees, and key employees (attach schedule)	—	63 —
64a	Tax-exempt bond liabilities (attach schedule)	—	64a —
b	Mortgages and other notes payable (attach schedule)	—	64b —
65	Other liabilities (describe ►)	—	65 —
66	Total liabilities (add lines 60 through 65)	—	66 735
Fund Balances or Net Assets			
Organizations that use fund accounting, check here <input checked="" type="checkbox"/> and complete lines 67 through 70 and lines 74 and 75 (see instructions).			
67a	Current unrestricted fund	—	67a 47,674
b	Current restricted fund	—	67b 170,405
68	Land, buildings, and equipment fund	—	68 —
69	Endowment fund	—	69 —
70	Other funds (describe ►)	—	70 —
Organizations that do not use fund accounting, check here <input type="checkbox"/> and complete lines 71 through 75 (see instructions).			
71	Capital stock or trust principal	—	71 —
72	Paid-in or capital surplus	—	72 —
73	Retained earnings or accumulated income	—	73 —
74	Total fund balances or net assets (add lines 67a through 70 OR lines 71 through 73; column (A) must equal line 19 and column (B) must equal line 21)	—	74 218,081
75	Total liabilities and fund balances/net assets (add lines 66 and 74)	—	75 218,816

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the information in such cases may be determined by the information presented on its return. Therefore, please make sure the information is true, correct, and accurate and fully describes the organization's programs and accomplishments.

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Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated (see instructions).)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
ROEL ABULJAIL BATTERJEE	PRESIDENT-PART	-0-	NONE	NONE
SHARIE ABUL' RAOF BATTERJEE	V.P. -PART	-0-	NONE	NONE
MARZIN M.S. BATTERJEE	SECY - PART	-0-	NONE	NONE
ENAM ARNAOUT	EXEC. DIR. - FULL	11,146	NONE	NONE
ALL OF THE ABOVE COULD BE CONTACTED AT: P.O. Box 548, WORTH, FL 32782	TOTALS		NONE	NONE

Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ☐ Yes ☒ No

Part VI Other Information

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.	76	X
77 Were any changes made in the organizing or governing documents, but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T, Exempt Organization Business Income Tax Return, for this year?	78b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement; see instructions.	79	X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? (See instructions.)	80a	X
b If "Yes," enter the name of the organization <u>N/A</u> and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81a Enter the amount of political expenditures, direct or indirect, as described in the instructions. [81a] <u>NONE</u>	81a	N/A
b Did the organization file Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations, for this year?	81b	N/A
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions for reporting in Part III.) [82b] <u>N/A</u>	82b	N/A
83 Did the organization comply with the public inspection requirements for returns and exemption applications?	83	X
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? (See General Instruction M.)	84b	N/A
85 Section 501(c)(4), (5), or (6) organizations.—a Were substantially all dues nondeductible by members?	85a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" to either 85a or 85b, do not complete 85c through 85h below.	85b	N/A
c Dues, assessments, and similar amounts from members for January 1994 and later.	85c	N/A
d Section 162(e) lobbying and political expenditures after December 1993.	85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices.	85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e; see instructions).	85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	N/A
h Does the organization elect to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86 Section 501(c)(7) organizations.—Enter:		
a Initiation fees and capital contributions included on line 12.	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities (See instructions.)	86b	N/A
87a Section 501(c)(12) organizations.—Enter: Gross income from members or shareholders	87a	N/A
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership? If "Yes," complete Part IX.	88	X
89 Public interest law firms.—Attach information described in the instructions.		
90 List the states with which a copy of this return is filed <u>ILLINOIS</u>		
91 The books are in care of <u>ENAM ARNAOUT</u> Telephone no. <u>(708) 233-0062</u> located at <u>PO Box 548, WORTH, FL</u> ZIP code <u>32782</u>		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041, U.S. Fiduciary Income Tax Return, should check here <input type="checkbox"/> and enter the amount of income received or accrued during the tax year.		

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Part VII Analysis of Income-Producing Activities N/A

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income (See instructions.)
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))					
105 TOTAL (add line 104, columns (B), (D), and (E)).					

Note: (Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.)

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes N/A

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). (See instructions.)
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Part IX Information Regarding Taxable Subsidiaries (Complete this Part if the "Yes" box on line 88 is checked.) N/A

Name, address, and employer identification number of corporation or partnership	Percentage of ownership interest	Nature of business activities	Total income	End-of-year assets
	%			
	%			
	%			
	%			
	%			

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Date	Title	
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input checked="" type="checkbox"/>	Preparer's social security no.
	Firm's name (if yours is not)		E.I. No.	
	Firm's address		ZIP code	

FIN: 36-3823186

ADDRESS P. O. Box 548

Calendar Year.

WOERTH. IL 60482

Fiscal Year ended 4-30-94

PAGE 2, PART II, LINE 22- GRANTS & ALLOCATIONS:

PAGE 2, PART II, LINE 22- GRANTS & ALLOCATIONS:			
GEN'L RELIEF EFFORTS TO BOSNIA	\$	11,000	
SHI-FA HOSPITAL, ISLAM ABAD, PAKISTAN		90,000	
SHI-FA FOUNDATION, ISLAM ABAD, PAKISTAN		110,000	
WINTER CLOTHING TO BOSNIA		200,000	
GEN'L RELIEF EFFORTS TO CROATIA		280,000	
ADVERTISING CAMPAIGN FOR RELIEF TO BOSNIA		92,521	
WOMEN FOR WOMEN		3,000	
TOTAL	\$	786,521	

Reference Part II, Line 42.

F.E.I.N. 36-3823181

[illegible]

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SCHEDULE A
(Form 990)Department of Treasury
Internal Rev. Service**Organization Exempt Under Section 501(c)(3)**(Except Private Foundation), and Section 501(e), 501(f), 501(k),
or Section 4947(a)(1) Nonexempt Charitable Trust**Supplementary Information**

OMB No. 1545-0047

1993

Name of the organization

ETHNIC COMMUNICATIONS OUTLET

Employer identification number

36-3139426**Part III Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**
(See instructions.) (List each one. If there are none, enter "None.")

(a) Name and address of employee paid more than \$30,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to empl. benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

Total number of other employees paid over \$30,000

**Part III Compensation of the Five Highest Paid Persons for Professional Services**
(See instructions.) (List each one. If there are none, enter "None.")

(a) Name and address of each person paid more than \$30,000	(b) Type of service	(c) Compensation

Total number of others receiving over \$30,000 for professional services

NONE**Part III Statements About Activities**

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum?		<input checked="" type="checkbox"/>
If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities. \$ N/A		
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:		
a Sale, exchange, or leasing of property?		<input checked="" type="checkbox"/>
b Lending of money or other extension of credit?		<input checked="" type="checkbox"/>
c Furnishing of goods, services, or facilities?		<input checked="" type="checkbox"/>
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE SCHEDULE	<input checked="" type="checkbox"/>	
e Transfer of any part of its income or assets?		<input checked="" type="checkbox"/>
If the answer to any question is "Yes," attach a detailed statement explaining the transactions.		
3 Does the organization make grants for scholarships, fellowships, student loans, etc.?		<input checked="" type="checkbox"/>
4 Attach a statement explaining how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See instructions.)		

For Paperwork Reduction Act Notice, see instructions to Form 990 (or Form 990EZ).

Schedule A (Form 990) 1993

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PUBLIC INS.

FIN: 36-3823186
Y/E: 4-30-94 Page 2Schedule A (Form 990) 1993 **BENEVOLENCE INT'L FOUNDATION**
Part III Reason for Non-Private Foundation Status (See instructions for definitions.)The organization is not a private foundation because it is (please check only **ONE** applicable box):

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 3.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule below.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule below.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule below.)
- 12 ☐ An organization that normally receives: (a) no more than 1/3 of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, and (b) more than 1/3 of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions -- subject to certain exceptions. See section 509(a)(2). (Also complete the Support Schedule below.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) boxes 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See instructions for Part IV, line 13.) *N/A*

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

Support Schedule (Complete only if you checked a box on lines 10, 11, or 12 above.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar yr. (or fiscal yr. beg.) ▶	(a) 1992	(b) 1991	(c) 1990	(d) 1989	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for organization's benefit and either paid to it or expended on its behalf					
21 Value of services/facilities furnished to organization by governmental unit without charge. Do not include value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22					
24 Line 23 minus line 17					
25 Enter 1% of line 23					

26 Organizations described in box 10 or 11:

a Enter 2% of amount in column (e), line 24.

b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1988 through 1992 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts here ▶

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Support Schedule continued on page 3)

*FIRST YEAR
OF OPERATION 4/30/94**N/A*

Schedule A (Form 990) 1993

BENEVOLENCE INT'L FOUNDATION

Part III Support Schedule (continued) (Complete only if you checked a box on lines 10, 11, or 12.)**27** Organizations described on line 12:

- a Attach a list, for amounts shown on lines 15, 16, and 17, to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year:

(1992) N/A (1991) N/A (1990) N/A (1989) N/A

- b Attach a list to show, for 1989 through 1992, the name of, and amount included in line 17 for, each person (other than a "disqualified person") from whom the organization received, during that year, an amount that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. Include organizations described in lines 5 through 11, as well as individuals. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of all these differences (the excess amounts) for each year:

(1992) N/A (1991) N/A (1990) N/A (1989) N/A

- 28** For an organization described in line 10, 11, or 12, that received any unusual grants during 1989 through 1992, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See instructions.) N/A

Part IV Private School Questionnaire N/A
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31	
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance? (See instructions.)	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, <u>NONDISCRIMINATION</u> ? If "No," attach explanation. (See instructions for Part V.)	35	

Schedule A (Form 990) 1993

Part VI-A**Lobbying Expenditures by Electing Public Charities** (See instructions.)

Page 4

(To be completed **ONLY** by an eligible organization that filed Form 5768)Check here **a**

If the organization belongs to an affiliated group (see instructions).

Check here **b**If you checked **a** and "limited control" provisions apply (see instructions).

N/A

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

(a)
Affiliated group
totals(b)
To be completed
for ALL electing
organizations

36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures (see Part VI-A instructions)	39		
40 Total exempt purpose expenditures (add lines 38 and 39) (see instructions)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table--			
If the amount on line 40 is --			
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44		

Caution: File Form 4720 if there is an amount on either line 43 or line 44.

4-Year Averaging Period Under Section 501(h)(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 1993	(b) 1992	(c) 1991	(d) 1990	(e) Total
45 Lobbying nontaxable amount (see instructions)					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures (see instructions) ...					
48 Grassroots non-taxable amount (see instructions) ...					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures (see instructions) ...					

Part VI-B**Lobbying Activity by Nonelecting Public Charities**

(For reporting by organizations that did not complete Part VI-A)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

Yes No Amount

a Volunteers			
b Paid staff or management (include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

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51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐ Yes ☒ No

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